

Certificate of Insurance



THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER.
THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES LISTED BELOW.

NAME AND ADDRESS OF AGENCY

Mountain West Insurance Inc.
P.O. Box 1179
Grand Junction, CO. 81501

COMPANIES AFFORDING COVERAGES

COMPANY LETTER **A** Reliance

COMPANY LETTER **B**

COMPANY LETTER **C**

COMPANY LETTER **D**

COMPANY LETTER **E**

ACT 1019/001

NAME AND ADDRESS OF INSURED

LUKI MILLING CORP.
2450 Industrial Blvd.
Grand Junction, CO. 81501

This is to certify that policies of insurance listed below have been issued to the insured named above and are in force at this time. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions and conditions of such policies.

COMPANY LETTER	TYPE OF INSURANCE	POLICY NUMBER	POLICY EXPIRATION DATE	Limits of Liability in Thousands (000)		
					EACH OCCURRENCE	AGGREGATE
A	GENERAL LIABILITY	#GL2-55-07-66		BODILY INJURY	\$	\$
	<input type="checkbox"/> COMPREHENSIVE FORM <input type="checkbox"/> PREMISES—OPERATIONS <input type="checkbox"/> EXPLOSION AND COLLAPSE HAZARD <input type="checkbox"/> UNDERGROUND HAZARD <input type="checkbox"/> PRODUCTS/COMPLETED OPERATIONS HAZARD <input type="checkbox"/> CONTRACTUAL INSURANCE <input type="checkbox"/> BROAD FORM PROPERTY DAMAGE <input type="checkbox"/> INDEPENDENT CONTRACTORS <input type="checkbox"/> PERSONAL INJURY			PROPERTY DAMAGE	\$	\$
				BODILY INJURY AND PROPERTY DAMAGE COMBINED	\$ 500	\$ 500
				PERSONAL INJURY		\$
				Manufacturers' and Contractors' Liab.		
	AUTOMOBILE LIABILITY			BODILY INJURY (EACH PERSON)	\$	
	<input type="checkbox"/> COMPREHENSIVE FORM <input type="checkbox"/> OWNED <input type="checkbox"/> HIRED <input type="checkbox"/> NON-OWNED			BODILY INJURY (EACH ACCIDENT)	\$	
				PROPERTY DAMAGE	\$	
				BODILY INJURY AND PROPERTY DAMAGE COMBINED	\$	
				EXCESS LIABILITY		
	<input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM			BODILY INJURY AND PROPERTY DAMAGE COMBINED	\$	\$
				WORKERS' COMPENSATION and EMPLOYERS' LIABILITY		
	OTHER			STATUTORY	\$	(EACH ACCIDENT)

RECEIVED
JUN 25 1981

DIVISION OF
OIL, GAS & MINING

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES

Mining

Cancellation: Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail ten days written notice to the below named certificate holder, but failure to mail such notice shall impose no obligation or liability of any kind upon the company.

NAME AND ADDRESS OF CERTIFICATE HOLDER:

State of Utah
Dept. Of Natural Resources
Board of Oil, Gas & Mining
1588 West North Temple
Salt Lake City, Utah 84116

DATE ISSUED: 06/24/81

Andrea R. Dufford
AUTHORIZED REPRESENTATIVE